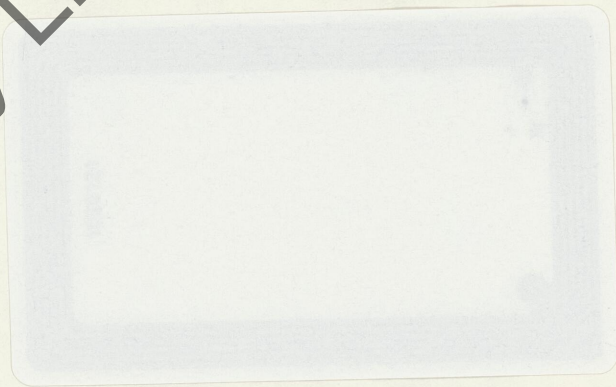


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EDITORIAL AND OPINION

by Larry Baitch

Dr. Boyd Banwell, Illinois College of Optometry's President Elect, has recently announced some very new and dynamic plans for the future of the college. He and the Board of Trustees have been working very hard in recent months to produce a scenerio which introduces more profound changes in the school than have ever occurred before at one time.

In this, my final editorial, I would like to address some of the issues and concerns which are on my mind, and which I feel are on the mind of my fellow students. I do not intend, as many people have encouraged me, to use this editorial to "take a last swipe" at the Administration, or, on the other hand, to "glorify" the new efforts of the Administration. I will try to analyze the relationship between students and administrators, and try to seek out the TRUTH from the mess of misinformation and innuendo of the past.

The TRUTH is often too hard to come by at the Illinois College of Optometry. In the past months, there have been changes in the personnel and structure of the Administration, and one voice has frequently conflicted with another. I feel it is important to make one point very clear — as co-editors of the FOCUS, Martin and I have made our first priority that of presenting information that is as accurate and complete as possible. Our sources on various issues were checked and rechecked for accuracy, and we attempted to remain evenhanded in our approach. I feel very strongly about this, for people may accuse us of sloppiness in laying out the paper, they may curse us for embarrassing misprints, they may criticize us on our lack of literary acumen or accuse us of poor taste in our humor, but I must emphasize our good intentions and constant quest to uncover the truth.

Dear Editor

The fourth-year class recently had the opportunity to view the artist's conception of the new "parking lot" wing. The wing brings a fresh new look and at the same time, blends with the physical structure already standing. Architecture strives for this continuity in designing buildings much in the same way the Board of Directors of major corporations strive for continuity and growth when bringing in new colleagues with fresh ideas.

ICO is at a point in time where we can not only improve that brick and mortar appearance of the school but through the retirement of Dr. Marshall and the appointment of Dr. Banwell to President we have the potential to bring in two new members to the Board of Trustees.

Although I am unfamiliar with the procedure of nominating people to serve on the Board it has come to my attention two people who would make excellent contributions to the school and to the optometric profession as well.

The first man is Thomas Griffith, O.D., a 1974 graduate of ICO who is currently practicing in West Virginia. He is consultant to the Department of Vocational Rehabilitation in West Virginia and serves as director of Eye Clinic at the rehab center.

Dr. Griffith believes that ICO delivers a sound educational base but should increase clinical instruction so that graduates would be prepared to practice the full scope of optometry as the law provides.

The second man is Richard Noyes, O.D., a 1978 ICO graduate who currently is practicing in Marion, Iowa. As a student here, Dr. Noyes was SA president, who enabled him to hear all student suggestions on improving the curriculum and the clinic.

It is time for the Administration to come to an understanding about its relationship with the student body. Dr. Banwell, Dean Cromer and the Board of Trustees must understand that to gain the students' trust, they must earn and be worthy of that trust. Deep scars in the face of the Student/Administration relationship have resulted from some of the events of the past year. The seriousness of the loss of some of ICO's most superlative instructors cannot be overstated, and will never be forgiven. Time after time, episodes of personality mismanagement and mistreatment of PEOPLE has occurred. The awkward treatment of Dr. Rosenbloom's "resignation" now stands at the forefront. Most recently, the handling of the information (or misinformation) on admissions has raised questions on the Administration's credibility.

Dr. Banwell recently expressed to me his dismay that rumors tend to run rampant at ICO; he stated that he did not understand why this constantly occurred. It is a plain and simple fact — RUMORS are the result of a lack of reliable information. RUMORS occur because decisions are made and policies are established by those in power, with little or no input from the students. We are like hungry peasants, thrown an occasional bit of food to occupy and satiate us, until we hunger again and another bit or piece is tossed to us. Fiscal matters are rarely made public, such as during accreditation, and even then the numbers are vague and unclear. When this sort of secretive behavior from an administration of a professional school is examined, the etiology of the ubiquitous rumors becomes clear. If there was more openness, more forum and discussion on all levels, not only would rumor and misinformation end, but the relationships would become one of encouragement and cooperation rather than adversarial and critical. Thus, by being more open

and honest, the Administration would actually be more fair to themselves.

Administrators should also understand the students' present skepticism about the changes that were announced by Dr. Banwell. A grandiose scheme for the expansion of our facility is in the works, consisting of a new wing to the college, new lab facilities, a new classroom and much more. Dr. Banwell even unveiled a beautiful artist's conception of the new addition a few weeks ago to the Fourth Year Class. He stated that this addition would be helpful in the elimination of crowding and space problems in the school.

A new complex is, of course, a very concrete way of assuring those concerned that something is being done to pull ICO out of the murky swamp of mediocrity that it currently wallows in. However, students may see things in a different light; tuition is going up again and class size is being cut. The Administration becomes vague when it attempts to explain the economics of the situation — how we are going to significantly reduce class size, deal with reduction in student loans, and then spend megabucks on a new facility. On the surface, it appears quite similar to the ridiculous Reagan motto of cutting taxes, doubling the Defense, and balancing the budget. Again, rumors appear... "we have oil wells in southern Illinois," or something equally as absurd. The Administration must be prepared to fully explain its intentions for the future and how they will be successfully implemented. They must lay their cards on the table, otherwise they will indefinitely be fighting a storm of skepticism and disrespect, which they do not deserve.

An important point that I would like to make is that the Administration should not lose sight of the real objectives of an Optometric education; while a new building is exciting and beautiful, it should be remembered that to make

Be Our Doctor and Join the Amoco Motor Club Free by J. Williams

This is a look inside commercial optometry without Herald Rivera. I obtained this information while working at a Pearle Vision Center. I will give you some things to consider as far as practicing at Pearle either as an employee or as a franchise owner.

Some Pearle commercials claim they do special tests for children's vision. The only difference between an adult exam and a children's exam where I worked was that air puff tonometry was done on the adults.

The format of the exam was similar for every patient. After the patient arrived for his appointment, if he had one, (the store where I worked was seldom booked more than one day ahead) he provided his demographic data the case history was taken. It typically consisted of five questions: how is your general health, are you taking any medications, do you have diabetes, do you have any kidney problems and have you ever had any eye diseases or eye surgery? After this, the patient's prescription was taken right off the glasses if they were wearing any. Next the doctor would come out and call the patient's name and they would go back to the exam room together.

The exam for a person over twenty years of age usually consisted of visual acuities, retinoscopy, a number seven, an internal and air puff tonometry. The doctor's part of the exam normally took less than ten minutes. Contact lens fittings usually took fifteen minutes or less. Hard fittings don't take as long because no trial fittings of hard contacts is done. There was a doctor who had just started working for Pearle and was substituting while the regular O.D. was on vacation. The substitute was taking 30 minutes for

headway in the upgrading of the school and in the enhancing of the reputation of the college, the prime objective of the new Directorate should be none other than the bettering of the quality of the Faculty, curriculum and RESEARCH. The ICO Faculty situation has been very underplayed in the past. In a previous edition of the FOCUS, Dr. Jan Jurkus stated that she felt that our Faculty was a very approachable and personable group. This is very true. Even in my travels to other schools, I have not seen a school with a more compassionate and likable Faculty. However, there still exists a problem with the caliber of teaching, and the dissemination of information in the classroom situation. Thinking back on my optometric education, very few instructors conveyed excitement to the material; few were the kind of teachers that made me want to come to class, who whet my appetite for knowledge, who made you WANT to even go to the library (heaven forbid) and read up more on the subject. Isn't that what the EDUCATIONAL EXPERIENCE is all about? Good teachers (not just "instructors" if you can understand the difference) are not easy to come by. But with a good reputation and a sensitive Administration that is willing to PAY the price for this kind of quality, we can get and develop them. For an educational institution to uplift itself, it must also obtain well-known, prolific people, who contribute as much to the PROFESSION as to the school. By definition, an educational institution must emphasize the production of new knowledge by the research carried out by its faculty members. It is rather hard to imagine optometrists actually using a technique or bit of knowledge in their practice that was developed or discovered at today's Illinois College of Optometry, and this is unfortunate. It is not hard for Flax's students at SUNY, or Ludlam's students at Pacific, or Griffen's at

CONT'D TOP OF P. 3

regular exams and forty-five minutes for soft contact lens fittings. The manager became upset because this doctor was taking too long.

Having discussed patient services, let's talk about treatment of employees. The help at Pearle is not paid very high wages. Until she left to work for a private O.D., I worked with a woman who graduated from Triton as an optometric technician and was a licensed optician. She had been working for Pearle three years and was making \$5.00 an hour. It can be tough to get a raise because the smaller the payroll the larger the bonus the manager gets. I did not like the low wages while I was there but I'm glad they did not pay very well. These low wages often caused people to leave as soon as they found a better paying job. After I had worked there four months, the three people I had started working with had all gone to work somewhere else. Whether they left because of me or Pearle's wages I'm not sure.

After they left, Pearle often hired an untrained person. This new employee was sometimes insufficiently trained to give good service and on occasion caused Pearle to lose customers.

Salaries for doctors around the Chicago area were in the \$20's and low \$30's. The salaries have been dropping in recent years because of a surplus of O.D.'s in this area. You can make more working for them in a rural area. But keep in mind you don't have a contract. The doctor at Pearle told me that if they can hire someone else cheaper they will. Managers are not paid very well at Pearle either.

Because of the difficulty of keeping good managers, and because they wanted to expand more rapidly, Pearle started franchising. The doctor where I

CONT'D P. 3, COL. 2

This year he lectured to the fourth-year class in Practice Management and my impression of him was that in a short time he was able to build a successful ethical practice by providing the best care to his patients.

Both men I feel would bring in dynamic new ideas as to the course ICO should take in the coming years.

Respectfully,
Thomas Cannon

DEAR SENIOR CLASS,

As May 30th rapidly approaches, I find myself becoming very melancholy. I can't believe those first year students I greeted four years ago are graduating already. After four years, I can honestly say that you are truly one of the greatest classes to pass through ICO. Your super personalities, unending wit and beautiful smiles will be missed passing my door in the Admissions Office.

Even though the few of you kid me about leaving here and never calling, writing or even seeing me again; I would like to believe this is not true. Many good friendships have come about during your four-year stay here at ICO and they will be treasured forever.

Best wishes to all of you. I am sure you will be very successful optometrists. Most important of all — be happy and enjoy life.

Sincerely,
Maureen Dalton

THE SUPPORT STAFF WOULD LIKE TO EXTEND THEIR SINCERE BEST WISHES TO THE 1982 I.C.O. GRADUATING CLASS

EDITORIAL CONT'D FROM P. 2

SCCO, or Flom's at Houston. It is a fact: ICO will never be one of Optometry's GREAT institutions (or as Dr. Banwell so often puts it, "Optometry's FLAGSHIP institution") until it deserves to be recognized by virtue of its ACHIEVEMENTS.

As ICO heads into a very challenging, exciting, and dynamic future, I leave hoping that Dr. Banwell, the Board, and the Dean always keep in mind that it is PEOPLE that make an institution great; the people and the resources that produce optometrists who are excited about their school and their profession. With a wise, sensitive and open-eared Administration, that excitement will be rewarded with unbounding success.

As I write these last words of editorial rhetoric, I make this plea — be better than you are. Strive for excellence. Be CREATIVE in your practice, and make a DIFFERENCE in the lives of the people who cross the threshold of your door.

With a tear in my eye, I wish the greatest of luck and success to my fellow classmates of the greatest class to ever grace the Illinois College of Optometry, THE CLASS OF 1982!

Dear Editor

There have been many changes in this past year, not all of which seemed to be in the students best interest. Even a five year tradition of holding commencement exercises in Rockefeller chapel was attempted. If not for the long hard work of the present 4th year class, who knows where they would be come May 30th; possibly back in Rodriguez Hall as it was six years ago.

It is also the strong desire and wishes of the present 3rd year class to continue that tradition. We, too, wish to graduate within the majestic halls of Rockefeller Chapel. However, it appears that this wish may soon be shattered unless the administration quickly comes to its decision as to the whereabouts of the 1983 graduation, since reservation must be made approximately one year in advance.

Graduation in Rockefeller Chapel is a good tradition lets keep it.

BILL LEFFLER
Graduation Committee '83

ROGER'S DOPE

By Roger Bangwell

QUESTION: I have heard that Northwestern University has invited ICO to become part of their university system. Has there actually been any such proposal? Who would be responsible for making such decisions?

ANSWER: There have been rumors of ICO associating with other universities for years. Four years ago, Sheldon Siegel, then Dean of Students, explained to the class of 1982 the answer to this question. The answer is the same today, as told by Dr. Wodis. First, there has never been a direct invitation by Northwestern University (NU) and it is questionable whether college officials from both schools have ever communicated. Next, other questions arise from such an affiliation. For example: would ICO be better off financially? Would ICO be able to determine the schools emphasis — clinical or academic? I admit, such an affiliation sounds good to students — use of NU facilities and benefits, more association with females (there are some beauties up in Evanston) and a Northwestern diploma — WOW! But, there would be many factors to consider by both students and ICO administration. The board of directors would make the ultimate decision of a question of this magnitude. Administration would do the research on this type of proposal.

TO THE CLASS OF '82

I have a lot of things to say and I want all of you to read this so I'll keep it short and to the point.

I feel that a teacher's primary responsibility is to his (or her) students, to give them every bit of knowledge that he (or she) possibly can to prepare them for the future. In a clinical science or profession such as Optometry, this knowledge includes clinical and practice management skills which must be maintained by practicing those skills lest they become stale or outmoded. With the honors you have bestowed up on me you would seem to agree that my thoughts and attitudes are correct, and for this I thank you sincerely.

You've made my very proud by giving me these awards, but the real proof of how well I've done and how ICO has done to prepare you, is how well you do when you leave these "hallowed halls". Your continued success is my further reward, now go out and make me proud.

Stay in touch,
Den Kircher, O.D.

CONT'D FROM P. 2, COL. 4

was working was buying a franchise and told me some of the details. The buyer pays \$5,000 for a franchising fee so he can hang a Pearle sign on his building. He also gets their discounts on stock items although the corporation owned stores receive a larger discount. If the prospective owner is putting up a new building, Pearl usually owns the building and he buys the equipment and fixtures that go inside. The franchise owner has to give Pearle 8% of his gross because they are such nice guys. He also gives them 6.5% of his gross for advertising. This is not bad for national advertising but the franchise owner still has to pay for any local advertising that he wants himself. So Pearle gets 14.5% of his gross, in addition to the fact that he's normally the one paying the lease on the building. I am not trying to say you can't make money in a franchise, but you have to do lots of volume. That means fast exams and probably incomplete care.

Here are a few more assorted facts about the Pearle where I worked. An exam for a child was \$17.00. An adult exam was \$20.00 because they charged \$3.00 for tonometry. The total hard lens cost was \$110: \$35 for the exam, \$20 for dispensing and \$55 for the contacts. The total cost of soft lenses was \$134: the lenses were \$79 and the exam and dispensing fees were the same as for hard. The only soft lenses they carried were B and L and A.O. No toric soft lenses were fitted. The exam fee for contact covered six months of "follow-up visits" which usually took less than five minutes.

Their one hour service was usually next day service on single vision. Pearle had to order bifocal lens blanks so it took a week to 10 days to complete bifocals. They charged \$26-38 for single vision lenses with a seven dollar oversize charge for eyesize over 54.

Another interesting fact is that Dr. Pearle himself has spoken before committees, state legislatures, against the passage of diagnostic drug laws. The executives at Pearle do not want the competition to be able to offer something that does not fit into the scheme of "drive-through" care.

I would say if you don't mind working for someone else, if it is OK with you to take orders from managers who are not eye care professionals, if you can tolerate being harassed at times by employees who are close friends with the manager, if you want to basically be a technician spinning the dials and cranking people through, Pearle would be a good place for you. However if you want to do V.T., use diagnostic or therapeutic pharmaceutical agents or be involved in other specialty areas you should probably work in a different atmosphere. At Pearle Vision Center they let you be the doctor, that does what they tell you to.

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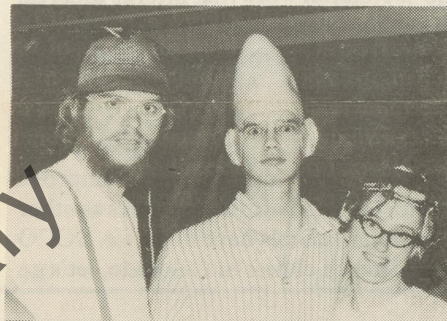


MEDICORNEA extends it's best wishes to the graduating class of 1982

SCENES FROM THE ADIPOSE PARTY



Pat Stomp, recently voted Support Staff of the Year by P.T.U. Fraternity also had the proud distinction of earning her BA from Roosevelt U. after 8 years of hard work.



CROMER'S CORNER

I want to take this opportunity to express my appreciation to the editors of this year's edition of the FOCUS. Mr. Kornblatt and Mr. Baitch have produced a fine student paper throughout the academic year.

I have had the opportunity of sharing information from the administration in the Dean's Column during this year. I am aware that not all crucial issues have been addressed or discussed, but feel that this did improve communications between the administration and the student body. I certainly am available to discuss any concerns individually or in scheduled meetings with a given class or organization.

Although student and administration do not very often agree, I am certain that all of us agree that we are working together to strengthen the profession of optometry. Our college is a significant tool that is available for bringing about change and improvement in the profession. As students become alumni, their roles change, however, they become more important to the institution that they have been associated with. I urge

each of you to continue to share your concerns, criticisms, and information with the administration throughout your professional career. We may never agree on the time table for accomplishing the goals, however, we certainly will agree on moving together to strengthen optometry.

For some of you, change will occur too slow, for other it will occur too rapidly. As I have indicated on numerous occasions, the thing that is certain is that change will occur at ICO. The administration is committed to receiving as much input from students, alumni, faculty and other individuals as possible. Although many times decisions are made quickly, input is still solicited and considered before the final decision is made.

I do want to take this opportunity to wish the graduating students the best in their future activity. I know that you will find the challenges and opportunities that this profession offers to be rewarding and stimulating. To the students who will be returning to ICO, I wish them success during their summer activities and encourage them to continue to provide their input to the Dean's Office.

FOURTH YEAR OPINION POLL

by Roger Trudell

A poll was distributed to all fourth year students and the following comments were taken from the 23 returns.

Q1: What did you like most about ICO? This question was responded most commonly with three answers: students, clinical experience, and faculty, ranking in that order. There were many comments about the camaraderie of the students and how all made it bearable for each other. Other 4th year commented on clinical experience, the variability of clinical experience, and how this has prepared us as clinical optometrists. Some interns mentioned faculty and staff as what they liked most about ICO. Other comments about what is liked (and well taken at that) are "graduating", and that "ICO is not a five year program".

Q2: What do you dislike about ICO? The answers here ranged from the location of the school to students who Bogart CL patients. The most common response concerned course quality at ICO. It was mentioned that some instructors are poor teachers even though they know their material. Courses such as Systemic Pathology, and Human Anatomy and Physiology, among others, were quoted as being "worthless", "a waste of time," or "redundant". A common complaint was that staff attitudes and qualifications were poor and that obtaining staff signatures was a "pain in the ____". Five students responded that they dislike Use computerized booking. 2. Hire more and more reliable help. 3. Hire an efficiency expert. Other systems which were noted for improvement that we all have dealt with include: the library, the referral system for V.T. and C.L.s, paperwork and secretarial work that interns must do on patients, and that the C.L. clinic is too small. Someone suggested to print the requirements for graduation which would put on paper the PCU/SCU/Externship/etc. — an excellent idea! Someone else mentioned to improve externships and affiliated clinics as other optometry schools have done, i.e. SCCO has outreach clinics in Colorado, let's go

skiing.

Q4: Has ICO prepared you for the real world of optometry? Most interns felt they were prepared for clinical optometry. Some mentioned that the V.T. department did not provide them with the experience they were attempting to grasp. A few interns mentioned that the C.L. department could provide more experience and exposure to specialty areas such as keratoconus, torics, and extended wear. Many people responded that an extended externship would prepare us more for optometry, as someone stated, "because you deal with optometry first hand". About 80% of the 4th year responders said that the practice management course needed improvement or that we are lacking in this area. "O.D.'s talking about their million dollar practices, did not teach us a thing." Suggestions for improvement were to bring in more specialists such as lawyers, accountants, financiers, etc. to teach on subjects such as "ordering frames", judge the economy of an area, how to do a bank proposal, and to teach us what really can be deducted off next years income taxes.

Q5: Why would/would not ICO be a good choice for future optometric candidates? 18 of the 23 returns said ICO would be a good choice, but all 23 responses gave qualifications to their answers. Reasons why ICO is a good choice is that the clinical experience makes it worthwhile and the exposure of all types of patients compared to other schools is unbeatable. Reasons given why ICO is not a good choice are that 1) some faculty have ego or personality problems, 2) school location, 3) SCU's are a mess, 4) academics need improvement, 5) vision therapy department needs improvement. To sum up this question I will quote one respondent's answer "to say that (ICO is a bad choice) would be foolish — it's the school we attended and it reflects on all of us."

Q6: What was your best experience at ICO? The most common response given — "graduation!" Other answers were Brady Hall hall slides, VOSH trips, externships, and the West Side VA. One

response was given concerning the second floor office people (Dean's office, admissions, registrars, and alumni office) because they were always "helpful" and had "cheery" attitudes. "The caliber of the people" met at ICO, was a common answer, as one stated, the people were both insane and intellectuals", I though Gallagher left 2nd year? The ground floor answer, and my favorite, for the Best ICO Experience was "helping patients."

Q7: What was your worst experience at ICO? 23 survey returns gave 16 different answers. Some are: 1) Summer clinic, paying tuition to work, 2) everyday clinic frustration of the front desk, calling patients, lost files, etc.; 3) CENSURED, 4) V.T. or Home V.T. p.r.s., 5) staff putting us down, 6) reception desk (the most common answer), 7) "Showing up", 8) Dr. Teshima's first O.O. exam, 9) "Dealing with egotistic and arrogant staff", 10) "The deplorable method in which Shansky and Alexander were treated when their employment was terminated", 11) having a patient sent to your room 45 minutes late, 12) looking for IPA files, 13) a comment not printable, about administration, 14) ICO bookstore — "what a rip off."

To preface the "Short Answer Section" of the poll, I would like to say questions concerning Worst Instructor and Staff had to be deleted before the poll was allowed to be printed. Many interns put this in anyway — and the results are not surprising.

Most people put more than one answer in for each of the short answers. The results are as follows, listing all those mentioned in order of number of times named: **Best Instructor:** Dr. Tennant, Dr. Alexander, Dr. Vieth, Dr. Day, Dr. Shansky, Dr. Porter, others mentioned are Dr. Hodur, Dr. Kelly, and Dr. Caden. **Most Underated Instructor:** Dr. Kirsher, tying for next place are Dr. Sanders, Dr. Kelly, Dr. Vieth, and Dr. Roy Teshima, others mentioned are Dr. Lannin, Dr. Day, and Dr. Caden. **Best Staff:** Dr. Yasko, Dr. Lannin, Dr. Kirscher, Dr. Herschowitz, Dr. Hodur, others mentioned are

Dr. Hettler, Dr. Quade, Dr. Dykstra, and Dr. Pass.

Other comments which were written on the polls follow: "ICO has its many faults as does any institution. We should all realize that improvements have been made and many people, Sunny Sanders for example, have really done a lot of work to try and improve ICO." "ICO, please screen employees better." One person wrote an entire writeup of ICO compared to the Chicago Cubs. Some of the comments are: "**Notetaking Service.** a good runner and very important ball player. Generally, keeps the fans informed and happy." "Path Lab — too inconsistent a hitter." "Low Vision — some fans would like to see some more of this hitter ———." "**The staff at the front desk** — the initial entry point for nearly all the players. This ball player is playing high school caliber ball. It's too bad we can't use a D.H." My more favorite comment, "THANK GOD WE'VE MADE IT! SEE YOU IN HAWAII IN 1984!"

**THIS PAPER IS
PAID FOR, IN
PART BY THE
ICO ALUMNI
ASSOCIATION.
WE THANK
THEM FOR
THEIR
CONTINUOUS
SUPPORT!**

ALUMNI ASSOCIATION KUDOS

By Tom Cannon

To paraphrase a well know song, "Now the time is here, the end is near," it is with anticipation we await May 30th. Once we take that degree in hand, we officially become ICO Alumni. To many of you, this means finally being able to say, "I am through with this school and never want to have anything more to do with it!" Unfortunately, in the last four years, many of us have had a bad experience with faculty, support staff and administration, and, maybe even with the building itself. All of us have endured the transition of a new administration and the overall academic structure of SCU's. But, to my knowledge, there has never been a complaint about the Alumni Association, the Alumni Council, or the staff of the Alumni office.

I've been looking back on these four years and have compiled a list, a sort of balance sheet, for what the Alumni Association has done for our class and for the student body as a whole.

At the top of the list is money given to the school which went into the operating budget. for the four years we were here, this totaled over \$324,000. If the Alumni Association hadn't given this money it would have had to come from a different source — and we all know that raising tuition is the easiest way to come up with operating cash. Over the past four years each student would have had to pay an extra \$540 in tuition.

Student activities and projects such as SVOSH, INTRAMURALS, AOSA, YEARBOOK, EXTERNSHIP and FOCUS — as well as new equipment,

classroom chairs and typewriters — have received approximately \$20,000 in Alumni Association funds. Although the combined Alumni contribution to the students has increased 100% — from \$3,000 our first year to \$6,000 our fourth year — the total of contributing alumni has been constant at approximately 20% of the total membership of 7,446. You may ask, "How is it possible to spend more money each year when the same amount is coming in?" The Alumni Association is based as a not-for-profit organization which enables the Association to build and maintain a fund. Our first year at ICO saw a balance of \$100,000 in this fund. It reached that amount because the President's Club, which is a separate fund-raising activity administered by the Alumni Association, has contributed yearly to reduce the \$62,000 mortgage pledge for the past eight years enabling membership dues to increase the fund balance. High interest rates the past three years have enabled the Alumni Association to increase spending without an increase in incoming dues. Today the fund still stands at \$100,000, but due to a decrease both in the number of President's Club members and in the number of contributing alumni Association members, down to 19%, there is a possibility of using part of the fund for operating costs and student projects.

The question arises as to why only 19% of the membership contributes to the Alumni Association. At the Council meetings and in Letters to the Editor in the various journals, we hear the cry

"Why should I support a school that is turning out competitors when there is an over-supply of optometrists now?" I cannot argue with this statement but it is a little one-sided, in that it doesn't look to the future when the post WWII graduates will be gone, and it doesn't address the need for the private school to maintain an operating cash flow while holding down the cost of tuition. It is a Catch 22 situation. The school must pay for fixed liabilities whether a class is one of 25 or of 600. The student pays a portion of those liabilities with tuition, so the fewer the students, the higher the tuition. However, there is a way to satisfy both the practicing optometrist and the optometry student. The Alumni Association has two types of contributing memberships: The \$25 per year regular and the \$100 per year Century Club, each with their own benefits. Taking the regular memberships first, consider what happens when all 7,446 alumni contribute \$2.08 per month to the Alumni Association for an annual balance of \$186,150. Class size can be cut by seven people with the \$186,150 making up for lost tuition. Students benefit by a "smaller" student-staff ratio and "increased patient" contact hours. Practitioners benefit by a decrease in the perceived surplus of optometrists. The \$2.08 is a small amount and the benefits realized by both practitioners and students may be small. But, consider what happens when all 7,466 become Century Club members at a cost of \$8.33 per month. The total income yearly now increases to \$744,600. This would allow a decrease in enrollment of approximately 30 students per class without an increase in tuition. The benefits in terms of student-staff ratio and in patient contact

and the decrease in the surplus of optometrists then increase fourfold.

It must be realized that both hypothetical cases of total regular and total Century Club membership does not take into account yearly inflation increases in fixed liabilities and faculty-staff pay increases and, as it is with all idealistic hypothetical situations, it probably will never come, but it is a way to work ourselves out of the Catch 22 situation we are caught in.

But for now, as a new graduate, we should be able to identify with students and the expense of the extracurricular activities to which the Alumni Association already donates. By all of the class becoming Century Club members on the sliding scale basis (first 1½ year is \$25, second year is \$50 and thereafter, \$100 per year) we will not have full Century Club benefits but will enable the alumni Association to distribute the funds to our favorite projects. The first year would generate \$3,775.00, the second year, \$7,550 and following years, \$15,100 per year to be distributed to SVOSH, FOCUS, YEARBOOK, GRADUATING BANQUET, INTRAMURALS, AOSA, GOLF TOURNAMENT: or if you prefer, just indicate on you check whatever organization or project you want your contribution to benefit. Everybody in our class has benefited by Alumni Association funds. Now let us as a class have 151 active and contributing members.

NOTICE

Our Senior Research Project is refitting Polycon rejects with complimentary Paraperm lenses. We would appreciate any referrals. **Irene Witt Box 501
Janice Walser Box 312**

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